

PATENT APPLICATION DECLARATION
COMBINED WITH POWER OF ATTORNEY

Attorney's Docket No.: CM02999J



Regular (Utility)



Design Application

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

ENTER TITLE HERE

the specification of which:



is attached hereto



was filed on: _____

as U.S. Serial No.: _____

and was amended on _____

(if applicable)

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to the patentability of this application in accordance with Title 37, Code of Federal Regulations, Section 1.56(a).

I hereby claim foreign priority benefits under Title 35, United States Code, Section 119(a)-(d), of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed:

Prior Foreign/PCT Application(s):



no such application(s) filed



such application(s) identified as follows:

Application Number	Country	Date of Filing (day, month, year)	Priority Claimed Under 37 U.S.C. 119
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No

I hereby claim the benefit under Title 35, United States Code § 119(e) of any United States provisional application(s) listed below:

Provisional Application Serial No.:

Provisional Application Filing Date:

I hereby claim the priority benefit under Title 35, United States Code, Section 120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, Section 112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, Section 1.56(a) which is material to the patentability of this application and which occurred between the filing date of the prior application and the national or PCT international filing date of this application:

Prior U.S. Application(s):

no such application(s) filed
 such application(s) identified as follows:

Application No.	Filing Date (day, month, year)	Status (Patented, Pending, Abandoned)

I HEREBY APPOINT THE FOLLOWING AS MY ATTORNEY(S) OR AGENT(S) WITH FULL POWER OF SUBSTITUTION TO PROSECUTE THIS APPLICATION AND TRANSACT ALL BUSINESS IN THE PATENT AND TRADEMARK OFFICE CONNECTED THEREWITH:

NAME(S)	REG. NO.(S)	ASSOCIATE POWER OF ATTORNEY ATTACHED	
Steven G. Parmelee	28,790	<input type="checkbox"/> Yes	<input type="checkbox"/> No
J. Ray Wood	36,062	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Daniel K. Nichols	29,420	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Val Jean F. Hillman	34,841	<input type="checkbox"/> Yes	<input type="checkbox"/> No
M. Mansour Ghomeshi	35,155	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Frank M. Scutch, III	34,484	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Lesley A. Rhyne	34,909	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Andrew S. Fuller	37,328	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Dale W. Dorinski	35,122	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Barbara R. Doutre	39,505.	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Scott M. Garrett	39,988	<input type="checkbox"/> Yes	<input type="checkbox"/> No
James A. Lamb	38,529	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Felipe J. Farley	38,445	<input type="checkbox"/> Yes	<input type="checkbox"/> No

Send correspondence to:

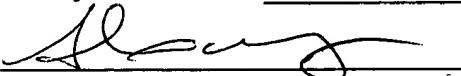
Motorola, Inc.
Intellectual Property Section
Law Department
8000 West Sunrise Boulevard
Fort Lauderdale, Florida 33322

Attention: M. Mansour Ghomeshi

Direct telephone calls to: (954) 723-6449
Direct faxes to: (954) 723-3871

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Full name of first-named or sole inventor <u>MAHESH B. BHUTA</u>		
Inventor's signature	 Date <u>12/15/99</u>	
Residence <u>Coral Springs</u>	Florida	
City	State or Foreign Country	
Citizenship <u>United States of America</u>		
Country		
Post Office Address <u>10441 N.W. 6th Court</u>		
Street Address		
<u>Coral Springs</u>	<u>Florida</u>	<u>33071</u>
City	State or Country	Zip Code

Full name of second-named joint inventor <u>ALEX C. WANG</u>		
Inventor's signature 	Date	<u>12/9/99</u>
Residence <u>Plantation</u>	Florida	
City	State or Foreign Country	
Citizenship <u>United States of America</u>		
Country		
Post Office Address <u>250 Jacaranda Drive - Apt. 507</u>		
Street Address		
<u>Plantation</u>	<u>Florida</u>	<u>33324</u>
City	State or Country	Zip Code

Full name of third-named joint inventor	CHARLES R. BARKER, JR.	
Inventor's signature	<i>Charles R. Barker Jr.</i>	Date
Residence	Plantation	Florida
	City	State or Foreign Country
Citizenship	United States of America	
	Country	
Post Office Address	9710 N.W. 7th Circle - Apt. 10-112	
	Street Address	
Plantation	Florida	33324
City	State or Country	Zip Code

Full name of fourth-named joint inventor		
Inventor's signature	Date	
Residence		
	City	State or Foreign Country
Citizenship		
	Country	
Post Office Address		
	Street Address	
City	State or Country	Zip Code

Full name of fifth-named joint inventor		
Inventor's signature	Date	
Residence		
	City	State or Foreign Country
Citizenship		
	Country	
Post Office Address		
	Street Address	
City	State or Country	Zip Code